

Substitute for form 1449/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheet 1 of 2

Complete If Known			
Application Number	10/660,902		
Filing Date	September 12, 2003		
First Named Inventor	Xing SU		
Art Unit	1637		
Examiner Name	A. M. Bertagna		
Attorney Docket Number	070702008020		

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Examiner Initials*	Cite No.1	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	
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Examiner	/Angela Bertagna/	Date	01/24/2007
Signature	,	Considered	01/24/2007

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Examiner Initials*	Cite No.'	Foreign Patent Document Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear

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		NON PATENT LITERATURE DOCUMENTS				
Examiner Cite No.1		Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.				
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